

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER South Bay AFL-CIO Labor Council Committee on Political Education Sponsored by South Bay AFL-CIO Labor Council		Date of This Filing 05/31/2007	Date Stamp RECEIVED San Jose City Clerk 2007 MAY 31 P 1:01	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 408-266-1790	I.D. NUMBER (if applicable) 744711	Report No. 49606072		
STREET ADDRESS 2102 Almaden Road, Suite 100		<input checked="" type="checkbox"/> Amendment to Report No. 49606072 (explain below)		
CITY San Jose, CA	STATE CA	ZIP CODE 95125	No. of Pages 2	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Kansen Chu		NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. City Council Member City of San Jose	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
05/26/2007	Food for volunteers	6.90
05/26/2007	Cost of phone calls	978.14

Reason for Amendment: Amendment to reflect corrected amounts

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CALIFORNIA
FORM **496**

I.D. NUMBER (if applicable)

744711

NAME OF FILER

South Bay AFL-CIO Labor Council Committee on Political Education
Sponsored by South Bay AFL-CIO Labor Council

3. Contributions of \$100 or More Received*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
05/26/2007	SEIU United Healthcare Workers PAC SCC (#747285) 555 Capitol Mall, Suite 1425 Sacramento, CA 95814-	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
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		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

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**Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 496 (Jan/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
866/275-3772